



CHESTERFIELD COUNTY ADMINISTRATIVE POLICIES AND PROCEDURES

Department: Human Resource Management
Subject: Separations and Unemployment Compensation

Policy Number: 6-2
Supersedes: 07/24/98
Date Issued: 01/01/05

I. INTRODUCTION

The purpose of this policy is to establish separation procedures to be utilized when an employee separates from the county. The policy also explains guidelines related to unemployment compensation.

II. FORMS

The following forms are available on the Human Resource Management Intranet Site or from Human Resource Management (HRM).

- A. **Separation Procedure Checklist** - The purpose of this form is to ensure that security personnel are notified each time an employee separates from the county and to ensure that separation procedures are followed. Regardless of the reason for separation, the employee's supervisor and/or HRM liaison shall complete the Separation Procedure Checklist.
- B. **Report of Separation** - This form provides the reason and circumstances surrounding an employee's separation from the county. It also describes the employee's overall performance and eligibility for rehire. This form should be detailed, as it is utilized by the Virginia Employment Commission (VEC) to evaluate unemployment compensation claims and for reference checks by potential employers.
- C. **Personnel Action Form** - The PAF is used to initiate a change to the employee record. Upon separation, the PAF is used to provide HRM with the separation date, separation reason, and eligibility for rehire. The information on the PAF should match the Report of Separation.
- D. **Exit Questionnaire** - On this form, the employee may provide feedback on the workplace and reason for separation.
- E. **Environmental Exit Questionnaire** - This form is utilized by Environmental Management to gather information on the environment.

III. SEPARATION PROCEDURES

- A. The Separation Procedure Checklist shall be completed no later than the employee's last workday and forwarded to HRM. Completion of the checklist ensures that:
 - 1. computer and building security access is deleted
 - 2. the Report of Separation is completed
 - 3. the Personnel Action Form is completed
 - 4. the employee is provided an Exit Questionnaire and Environmental Exit Questionnaire
 - 5. the employee is provided the Benefits at Separation or Retirement information packet
 - 6. the employee is removed from various departmental lists/accounts
 - 7. the employee has made arrangements to receive their last pay check.
- B. **Resignation**

When a department receives notice that an employee intends to resign, an effort should be made by a department representative to advise the employee that they should provide written notice of intent to resign at least two weeks prior to the date of resignation. This will ensure that the employee resigns in good standing. Failure to comply with this expectation shall be

entered on the employee's personnel record and may be grounds for refusal to rehire the employee. Employees are expected to work their entire two weeks notice unless otherwise approved by the supervisor. Department directors/office administrators and assistant directors are expected to provide four weeks notice. When a letter of resignation has been submitted, it should be attached to the PAF, the Report of Separation, and the Separation Procedure Checklist and immediately forwarded to HRM to avoid overpayment of salary.

C. Involuntary Separations

For all involuntary separations, unsatisfactory performance or misconduct should be documented and shared with the employee. For all non-probationary, full-time employees, a pre-termination hearing must be held (refer to Policy 3-9-2). Once the determination has been made to terminate an employee, the supervisor or HRM liaison will complete the Separation Procedure Checklist. Unless the reason for termination is based upon a sole incident of misconduct, the supervisor should review the employment history of the employee to insure that all pertinent data to support the termination action is included on the Report of Separation. Information provided on the Report of Separation shall be specific (i.e. date of counseling, purpose of counseling, letter of reprimand, excessive absenteeism including dates, specific violation of policies, procedures, orders, dates and circumstances, etc.). The Report of Separation, completed by the supervisor and reviewed by the department director/office administrator, will be attached to the Personnel Action Form reporting the termination.

IV. UNEMPLOYMENT COMPENSATION

A. Procedures

If a separated employee wants to apply for unemployment compensation, it is the responsibility of the employee to do so with the Virginia Employment Commission (VEC). Once the employee has submitted an unemployment compensation claim, the VEC will contact HRM to obtain facts about the employee's separation. Thus, it is beneficial for the employee's supervisor/HRM liaison to provide detailed information to HRM about the employee's separation in a timely fashion. Comments that are vague and lack specific details may result in VEC's determination in favor of the employee, even when it is the county's position that the employee should not be eligible. In an effort to contain costs of unemployment compensation, special emphasis must be placed on documenting the reasons and events that lead to the separation on the Report of Separation Form. In the case of involuntary terminations, it is the department's responsibility to provide very specific comments on the reasons for the termination (especially those that pertain to misconduct by the employee). Department representatives who need assistance with preparing appropriate documentation should contact HRM.

HRM may request additional information from the department regarding a separation. Once HRM has provided the separation documents to the VEC, a representative from the VEC may contact the supervisor for a fact-finding interview. During this interview the VEC representative will discuss the facts regarding the employee's separation.

B. Eligibility for Unemployment Compensation

Eligibility for compensation is determined by VEC, based on information from the separated employee and county records. An employee who is separated from the county due to layoff or due to the fact that the county is no longer in need of their services may be eligible to receive unemployment compensation through the VEC.

Individuals who resign for no good cause, or separate due to misconduct, may not be eligible to receive compensation. An employee who is terminated due to a positive drug or alcohol test may not be eligible to receive benefits from the VEC. In most instances, the burden of proof rests with the county to show cause for terminating an employee.

If the VEC awards compensation to the separated employee, the amount the county pays to the VEC for unemployment compensation is deducted from departmental budgets.

**CHESTERFIELD COUNTY
REPORT OF SEPARATION**

Employee's Name (Last, First, MI)		Social Security Number	Department		
Hire Date	Separation Date	Grade	Current Salary		
Voluntary - Was letter of resignation received? <input type="checkbox"/> Yes (attached) <input type="checkbox"/> No		<input type="checkbox"/> Full-Time Employee <input type="checkbox"/> Part-Time Employee	Job Title 		
Name and phone number of person most familiar with details of this separation:					
<p>Reason for separation: Unemployment insurance claims are a major cost to the County. The Virginia Employment Commission requires specific proof of misconduct on the part of the employee in cases of involuntary separation. In such cases, please include all pertinent details regarding the separation action, i.e. dates of incidents, circumstances leading to separation, etc. Attach supplemental sheets as necessary. Please check one that applies.</p> <table style="width: 100%;"> <tr> <td style="vertical-align: top; width: 50%;"> <u>Voluntary:</u> <input type="checkbox"/> 01 - Family Obligations <input type="checkbox"/> 02 - Return to School <input type="checkbox"/> 03 - Relocation <input type="checkbox"/> 04 - Medical <input type="checkbox"/> 07 - Career Change <input type="checkbox"/> 08 - Dissatisfied with job duties/supervisory relationship/working conditions <input type="checkbox"/> 09 - Career Advancement <input type="checkbox"/> 12 - Orientation No-Show <input type="checkbox"/> 60 - Reduction in Force (RIF) <u>Retirement:</u> <input type="checkbox"/> 30 - Service Retirement <input type="checkbox"/> 34 - Disability Retirement </td> <td style="vertical-align: top; width: 50%;"> <u>Involuntary:</u> <input type="checkbox"/> 21 - Attendance <input type="checkbox"/> 22 - Job Abandonment <input type="checkbox"/> 40 - Probationary Release <input type="checkbox"/> 42 - Unsatisfactory Performance <input type="checkbox"/> 46 - Misconduct <input type="checkbox"/> 45 - Dishonesty <input type="checkbox"/> 44 - Insubordination <input type="checkbox"/> 43 - Policy Violation <input type="checkbox"/> 48 - Temporary Job <u>Miscellaneous</u> <input type="checkbox"/> 41 - Mutual Agreement <input type="checkbox"/> 80 - Deceased <input type="checkbox"/> 13 - Other_____ </td> </tr> </table>				<u>Voluntary:</u> <input type="checkbox"/> 01 - Family Obligations <input type="checkbox"/> 02 - Return to School <input type="checkbox"/> 03 - Relocation <input type="checkbox"/> 04 - Medical <input type="checkbox"/> 07 - Career Change <input type="checkbox"/> 08 - Dissatisfied with job duties/supervisory relationship/working conditions <input type="checkbox"/> 09 - Career Advancement <input type="checkbox"/> 12 - Orientation No-Show <input type="checkbox"/> 60 - Reduction in Force (RIF) <u>Retirement:</u> <input type="checkbox"/> 30 - Service Retirement <input type="checkbox"/> 34 - Disability Retirement	<u>Involuntary:</u> <input type="checkbox"/> 21 - Attendance <input type="checkbox"/> 22 - Job Abandonment <input type="checkbox"/> 40 - Probationary Release <input type="checkbox"/> 42 - Unsatisfactory Performance <input type="checkbox"/> 46 - Misconduct <input type="checkbox"/> 45 - Dishonesty <input type="checkbox"/> 44 - Insubordination <input type="checkbox"/> 43 - Policy Violation <input type="checkbox"/> 48 - Temporary Job <u>Miscellaneous</u> <input type="checkbox"/> 41 - Mutual Agreement <input type="checkbox"/> 80 - Deceased <input type="checkbox"/> 13 - Other_____
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PERFORMANCE EVALUATION

Many former employees apply for re-employment. Your evaluation of the employee's performance can be of significant value at a later time. A brief description of duties at the time of separation, and how they were performed could be very important. **BE SPECIFIC.**

DESCRIPTION OF DUTIES:

EVALUATION OF EMPLOYEE'S PERFORMANCE:

ELIGIBLE FOR REHIRE IN THE DEPARTMENT?

- ☐ Yes
 - ☐ Cannot make this determination for reasons such as:
 - Insufficient opportunity to assess performance
 - Insufficient opportunity to assess capability
 - Insufficient integration of employee into work environment
 - Mutual misunderstanding about job expectations
 - Inability to predict future performance or capability
 - ☐ No
 - ☐ Request HRM review for not eligible in the County
- If no, explain:

Supervisor's Signature

Date

Director's Signature

Date

HRM USE ONLY

- ☐ Not eligible for rehire in County

HRM Director's Signature

Date

CHESTERFIELD COUNTY EXIT QUESTIONNAIRE

In an effort to continuously improve our workplace, we would like your honest feedback regarding your work experience while you were employed with Chesterfield County. All responses to this questionnaire are confidential. Your responses will NOT be used to identify you, but will be used in a summary annual report to your Department Director. If you feel uncomfortable responding to any question, you may leave it blank.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
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COMMUNICATION & WORK ENVIRONMENT

1. I was proud to be an employee of Chesterfield County.	(1)	(2)	(3)	(4)	(5)
2. I had a clear understanding of my job expectations.	(1)	(2)	(3)	(4)	(5)
3. The amount of work expected of me was reasonable.	(1)	(2)	(3)	(4)	(5)
4. Customer service standards were clearly defined and communicated.	(1)	(2)	(3)	(4)	(5)
5. I had the necessary equipment, tools, and materials that I needed to do my job properly.	(1)	(2)	(3)	(4)	(5)
6. There was effective communication between different work units in my department.	(1)	(2)	(3)	(4)	(5)
7. Employees are treated with the same level of personal respect, regardless of rank or job title.	(1)	(2)	(3)	(4)	(5)
8. I received sufficient information regarding personnel policies.	(1)	(2)	(3)	(4)	(5)
9. Policies were applied consistently in my department.	(1)	(2)	(3)	(4)	(5)
10. My department is concerned about employee health and safety.	(1)	(2)	(3)	(4)	(5)

TEAMWORK, EMPOWERMENT & INVOLVEMENT

11. My department encouraged the use of TQI tools and techniques to identify and implement quality improvements.	(1)	(2)	(3)	(4)	(5)
12. My immediate supervisor encouraged and supported creativity and new ways of doing things.	(1)	(2)	(3)	(4)	(5)
13. There is cooperation and teamwork among employees within my department.	(1)	(2)	(3)	(4)	(5)
14. Employees were recognized for working together as well as for individual performances.	(1)	(2)	(3)	(4)	(5)
15. Employees were held personally accountable for the results of their work.	(1)	(2)	(3)	(4)	(5)
16. My immediate supervisor encouraged ethical business practices in all transactions and interactions.	(1)	(2)	(3)	(4)	(5)
17. There were severe consequences for unethical behavior.	(1)	(2)	(3)	(4)	(5)

TRAINING & DEVELOPMENT

18. I was given a chance to learn new skills and develop new talents.	(1)	(2)	(3)	(4)	(5)
19. I received the training I needed to do my current job well.	(1)	(2)	(3)	(4)	(5)
20. I received enough feedback on how well I did my job.	(1)	(2)	(3)	(4)	(5)

RECOGNITION, COMPENSATION & BENEFITS

21. I was paid fairly compared with the pay that I could get elsewhere for similar work.	(1)	(2)	(3)	(4)	(5)
22. The employee benefits package met my needs (including health care options, deferred compensation options, retirement, annual leave, sick leave, and holidays).	(1)	(2)	(3)	(4)	(5)
23. In general, my department did a good job of recognizing employees.	(1)	(2)	(3)	(4)	(5)
24. I received meaningful rewards for the work performed.	(1)	(2)	(3)	(4)	(5)

BACKGROUND INFORMATION

DEPARTMENT: _____ YEARS OF SERVICE _____

DATE SEPARATED: _____

Full-Time / Part-Time Status

25. Are you a full-time or part-time employee?

- ☐ 1 Full-time ☐ 2 Part-Time (with benefits) ☐ 3 Part-Time (without benefits)

Gender

26. What is your Gender?

- ☐ 1 Female ☐ 2 Male

Ethnic Background

27. What is your ethnic background?

- ☐ 1 African American ☐ 3 American Indian ☐ 5 Caucasian
☐ 2 Hispanic ☐ 4 Asian, Pacific Islanders ☐ 6 Other

28. What type of separation is this considered?

- ☐ 1 Resigned ☐ 3 Retired ☐ 5 Other – please state _____
☐ 2 Terminated ☐ 4 End of Project/Grant

Primary Reason for Leaving

29. What is the **primary** reason you are leaving the County? (You may select up to 2 reasons)

- | | | |
|---|--|--------------------------------------|
| <input type="radio"/> 1 Opportunity for Advancement/
More Challenging Position | <input type="radio"/> 7 Work/Life Balance or Family Reasons | <input type="radio"/> 13 Terminated |
| <input type="radio"/> 2 Higher Salary | <input type="radio"/> 8 Lack of Learning & Development Opportunities | <input type="radio"/> 14 Other _____ |
| <input type="radio"/> 3 Better Benefit Package | <input type="radio"/> 9 Medical | |
| <input type="radio"/> 4 Relocation | <input type="radio"/> 10 Return to School | |
| <input type="radio"/> 5 Career Change | <input type="radio"/> 11 Relationship with supervisor | |
| <input type="radio"/> 6 More flexible work schedule | <input type="radio"/> 12 Dissatisfied with work environment/job duties | |

30. What actions could have been taken in order to retain you as an employee?

31. Comments:

32. I give permission for HRM to share this survey with my Department.

- ☐ 1 Yes ☐ 2 No

THANK YOU for taking time to complete this survey.

After completing this questionnaire, place it in a confidential envelope and forward to Human Resource Management, Room 303, Administration Building, or P. O. Box 40, Chesterfield, VA 23832.

SEPARATION PROCEDURE CHECKLIST

Please check the appropriate boxes, print and return completed Separation Procedure Checklist, Report of Separation and Personnel Action Form (PAF) to HRM.

Employee _____ Dept. _____ Title _____ Date of Separation _____

To Be Done Immediately Upon Notification of Separation (but no later than last work day)

- ☐ 1. Delete all computer and building security access. Date completed _____.
 - Contact IST & Security Coordinator via one email Notifychecklist@chesterfield.gov to delete mainframe/Integral accounts/computer security/Outlook/countynet employee directory/dial-up or remote access/telephone audix account and Administration building access. Include name, department and date of separation. ***If separation is controversial call Employee Relations, HRM 768-7341.***
 - Collect County ID/Proximity card (return to HRM) & gold name badge (destroy), if issued.
 - Collect Keys, if issued.
 - Collect Purchasing Card, if issued.
 - ☐ 2. Complete [Report of Separation](#). Date completed _____.
 - Attach letter of resignation, if submitted.
 - Please indicate the exact reason for separation and provide details. Important: This form is used to evaluate potential VEC claims. ([Description of reasons for separation](#))
 - Indicate on the Report of Separation [by checking the appropriate box] whether or not the employee is eligible for rehire.
 - If an employee is not eligible for rehire in the department, have the supervisor notify the terminating employee of rehire status in writing (contact HRM for a sample). Attach a copy of the letter with the Report of Separation.
 - If a department recommends ineligible for rehire in the county HRM will review recommendation and notify employee of ineligibility for rehire in county, if appropriate.
 - ☐ 3. Complete Personnel Action Form. Date completed _____.
 - Separation date, separation reason, and eligibility for rehire information should match data on Report of Separation.
 - Ensure that employee's current address is correct.
 - ☐ 4. Forward completed PAF, Report of Separation and Separation Procedure Checklist to HRM.
Date completed _____.
- ⇒ ***Please note that it is important for HRM to receive the Separation Procedure Checklist, Personnel Action Form and the Report of Separation in a timely manner in order to avoid paying the employee for hours not worked and to discontinue benefits.***
- ☐ 5. Provide employee (both full time and part time) with [exit questionnaire](#) and self-addressed envelope (attached or contact HRM- 748-1551 or pricedi@chesterfield.gov). Date completed _____.
 - Remind employee to return questionnaire to HRM.
 - Inform employee that he/she may schedule an exit interview with HRM staff by calling 768-7355.
 - Provide [Environmental Exit Questionnaire](#).
 - ☐ 6. Provide employee with [benefits information document](#), if applicable. Date completed _____.
 - Inform separating employee that HRM will mail COBRA (including EAP), Flexible Spending, Life Insurance Conversion, and VRS refund information to his/her home address if applicable. If the employee desires he/she may contact HRM's Benefits Specialist (748-1479) to schedule a meeting to discuss options.
 - ☐ 7. Coordinate deletion from any departmental lists/accounts. Date completed _____.
 - ☐ 8. Coordinate with employee the distribution of his/her final paycheck/pay-stub (i.e. pick up at office or mail to employee's address). Date completed _____.

Have You Completed All Items On This Checklist? ☐ Yes ☐ No If No, Indicate Reasons: _____

Checklist Completed By: _____

HRM (Initial)

(Date)

(Name/Title)

(Phone #)



Chesterfield County, Virginia Office of Environmental Management

9854 Lori Road - Suite 200 – P.O. Box 40 – Chesterfield, VA 23832-0040

Phone: (804) 717-6531 – Fax (804) 706-2055 – Internet: chesterfield.gov

ROBERT L. EANES

Assistant to the County Administrator

Thank you for your previous service to the County of Chesterfield. In accordance with our premise of environmental stewardship, and our desire to impart a healthy environment to future generations, the County has established the Office of Environmental Management. The office will direct, implement and coordinate the County's Environmental Management Program and centralize environmental management activities and records.

Our mission includes investigating past, present and future activities and processes within the county that may have an adverse impact on the environment. We would greatly appreciate a moment of your time to assist us in this endeavor. At your convenience, please answer the questions below and return them in the envelope provided by Human Resource Management. Your answers and comments are confidential.

Please feel free to contact us at 717-6531. Thank you for helping us keep Chesterfield County environmentally friendly.

Jeff Howard

Environmental Program Manager

Do you know, or have you heard, of any current or past processes/activities within the County that may adversely impact the environment? If so, please explain.

Do you know, or have you heard, of any discharges to air, water or soil in the County that may have an adverse environmental impact? If so, please explain.

Do you know, or have you heard, of any waste disposal practices in the County that may have an adverse environmental impact? If so, please explain.

Do you have any suggestions or advice for us that will benefit the natural environment of the County? If so, please explain.